# FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR ORM LIMITED OFFERING EXCEPTION

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OMB APPROVAL OMB Number: 3235-0076 December 31, 1993 Expires: Estimated average burden

SEC L	JSE ONLY
Prefix	Serial
DATE	RECEIVED

WASH DO		
Name of Offering ( check if this is an amendment and name has changed, and indicate cha	inge.) Series B Preferred Stock Offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505	Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment		
A. BASIC IDENTIFICATION	N DATA	
1. Enter the information requested about the issuer		
Name of Issuer ( check if this is an amendment and name has changed, and indicate	e change.)	
Apta Software, Inc.		
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)	PROCESSED
5151 East Broadway, Suite 900, Tucson, AZ 85711	(520) 663-0250	OCT 1 0 2002
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)	P
(II different from Executive Offices)		THOMSON
Dispute Chair		ANOINE
Brief Description of Business		
Development and sale of computer software accounting programs.	1 100 100 100 100 100 100 100 100 100 1	
Type of Business Organization	0205995	<u>;</u>
corporation limited partnership, already formed oth	her (please specify):	
business trust limited partnership, to be formed		
Actual or Estimated Date of Incorporation or Organization:	Year 0 0 🔀 Actual	Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation to	for State:	
CN for Canada; FN for other foreign jurisdiction)		DE

## GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 C.F.R. 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in available state exemption unless such exemption is predicated on the filing of a federal notice.

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etania zirtila			A. BASIC IDENTIF	ICATION DATA		
Enter the in	formation red	quested for the fol	lowing:			
•	Each prome	oter of the issuer,	if the issuer has been organ	nized within the past five	years;	
•		icial owner havin	ng the power to vote or dis	pose, or direct the vote of	or disposition of, 1	0% or more of a class of
•	Each execuissuers; and		director of corporate issu	ers and of corporate gen	neral and managin	g partners of partnership
•	Each gener	al and managing	partner of partnership issue	ers.		
Check Box(es) t	that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last	t name first, i	f individual)				
Diaz, Alfredo						
Business or Res	idence Addre	ess (Number and S	Street, City, State, Zip Cod	e)		
5151 East Broad	dway, Suite 9	00, Tucson, AZ	85711			
Check Box(es) t		Promoter	Beneficial Owner	Executive Officer	Director :	General and/or: Managing Partner
Full Name (Last Strickland, Jame		f individual)				
Business or Res	idence Addre	ess (Number and S 00, Tucson, AZ	Street, City, State, Zip Cod 85711	e)		
Check Box(es) t		Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last	t name first, i	f individual)				
Ferguson, Frank	ς E.					
Business or Res	idence Addre	ess (Number and	Street, City, State, Zip Cod	e)		
8 Holton Road,	Lexington, M	1A 02421-6406				
Check Box(es) 1	that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last Friesen, Robert		f individual)				
Business or Res	sidence Addre	ess (Number and ) Tucson, AZ 8571	Street, City, State, Zip Cod	(e)		
Check Box(es)		Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Las	t name first, i	f individual)				
Dorf, Roger A.						
	sidence Addre	ess (Number and	Street, City, State, Zip Cod	e)		
1200 Barton Cr	eek Boulevar	d, #54, Austin, <u>T</u>	X 78735	WIR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business of Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Coronado Venture Fund IV L.P.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
P. O. Box 65420, Tucson, AZ 85728	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Beane, S. Robert	
Business or Residence Address (Number and Street, City, State, Zip Code)	
117 Sunny Ranch Road, P. O. Box 935, Far Hills, NJ 07931	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Gardner, Stephen W.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
5151 East Broadway Blvd., Suite 900, Tucson AZ 85711	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Dubiness of Residence Fluidess (Frances and Saver, Step, Sauc, Esp Code)	

					E	s. INFOI	RMATIO	N ABOU	T OFFER	ING		<del></del>	
1.	Has the i	ssuer sol	d, or does	the issu	la est timalante dalla di				ABOUT 175 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	C			] Yes ⊠ No
						, if filing						_	
2.			•			, .			1?			\$	4.000.00
3.						-							Yes No
4.		_	-		-	_			ill be paid			_	J 100 🗀 110
	securities registere five (5)	y, any constitute of the order	mmission offering. e SEC ar	or similate If a persond/or with ed are a	ar remune son to be h a state ssociated	ration for listed is or states,	solicitation an associ list the n	on of purc ated perso ame of th	hasers in con or agen e broker of or dealer,	onnection t of a bro r dealer.	with sale ker or de If more t	s of aler han	
Ful	ll Name (L	ast name	first, if i	ndividua	)								
N/A	A												
	siness or I	Residence	Address	(Numbe	r and Stre	et, City, S	State, Zip	Code)					
Na	me of Ass	ociated E	Broker or	Dealer									
									<u></u>	·			
Sta	ites in Wh		n Listed l tes" or ch				Solicit Pur	chasers					All States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT]	[NE]	[NV]	[HN]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Fu!	ll Name (I	ast name	e first, if i	ndividua	1)								
_		S	A 1.1	011	1.04		30-1-7	(C. 1.)					
Вu	siness or l	cesidence	e Address	(Numbe	r and Stre	et, City, a	State, Zip	Code)					
	<u> </u>			D 1									
Na	me of Ass	ociated I	Broker or	Dealer									
									<del></del>	·			
Sta	ates in Wh		on Listed : tes" or ch				Solicit Pur	chasers					All States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
_	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ru	ll Name (I	_ast name	e iirst, ii i	naiviaua	1)								
Bu	isiness or l	Residenc	e Address	(Numbe	r and Str	eet, City, l	State, Zip	Code)					
													<del></del>
Na	me of Ass	ociated I	Broker or	Dealer									
						•							
Sta	ates in Wh						Solicit Pu	rchasers	-				
	•		ites" or ch				ram.	[DE]	(D.C)	From 3	rc - 1	FY 143	All States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[MI] [OH]	[MN]	[MS]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange \$534,000 and already exchanged. Type of Security Aggregate Amount Offering Price Already Sold Debt..... \$0 \$0 Equity Series B Preferred Stock Convertible into Common.... \$534,000 \$534,000 Convertible Securities (including warrants)Warrant to purchase Common ..... \$0 Partnership Interests \$0 \$0 Other (Specify \_\_\_\_\_\_) \$0 Total ..... \$534,000 \$534,000 Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases \$534,000 Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) N/A Answer also in Appendix, Column 4 if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505 N/A \$N/A Regulation A \$N/A Rule 504 \$<u>N/A</u>\_\_\_ N/A Total..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$0 Printing and Engraving Costs... \$0 Legal Fees \$15,000 Accounting Fees \$0 Engineering Fees. \$0 \$0 Sales Commissions (specify finders' fees separately)..... Other Expenses (identify): Blue Sky filing fees Total ..... \$<u>15,00</u>0

b. Enter the difference between the aggregate offering price expenses furnished in response to Part C-Question 4.a. issuer."	This difference is the "adjuste	ed gross	proceeds to the		\$519,00.00		
<ol> <li>Indicate below the amount of the adjusted gross proceeds to purposes shown. If the amount for any purpose is not know estimate. The total of the payments listed must equal the ad Part C – Question 4.b above.</li> </ol>	n, furnish an estimate and ch	eck the b	oox to the left of the				
			Payments to Officers, Directors, & Affiliates		Payments to Others		
Salaries and fees			\$0		\$ <u>0</u>		
Purchase of real estate	•••••	. $\square$	\$0		\$ <u>0</u>		
Purchase, rental or leasing and installation of machinery	and equipment	. $\square$	\$0		\$0		
Construction or leasing of plant buildings and facilities		. $\square$	\$ <u>0</u>		\$ <u>0</u>		
Acquisition of other businesses (including the value of soffering that may be used in exchange for the assets or spursuant to a merger)	securities of another issuer		\$ <u>0</u>		\$0		
Repayment of indebtedness		. $\square$	\$		\$		
Working capital		. 🗆	\$0	$\boxtimes$	\$519,000.00		
Other (specify):	ther (specify):						
Column Totals		. 🗆	\$0		\$519,000.00		
Total Payments Listed (column totals added)		••••••	\(\sime\) \(\sime\) \(\sime\)	9,000.00	<u> </u>		
D. 1	GEDERAL SIGNATURE						
The issuer has duly caused this notice to be signed by the undersign onstitutes an undertaking by the issuer to furnish to the U.S. Surnished by the issuer to any non-accredited investor pursuant to p	ecurities and Exchange Cor	nmissior					
Issuer (Print or Type)	Signaturd	$\sqrt{}$		Date			
APTA SOFTWARE, INC.	( ) le 11	V		Septem	ba 3, 2002		
Name of Signer (Print or Type)	Title of Signer (Print or Typ	e)					
Alfredo Diaz	President						
	·						

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice of Form D (17 CFR 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issue to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.
	he issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the indersigned duly authorized person.
I	Suer (Print or Type)  Signature  Date
A	PTA SOFTWARE, INC. Septemb 23, 2002
N	Jame (Print or Type)  Title (Print or Type)

President

### Instruction:

Alfredo Diaz

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
			(Part C-Item 1)	Type of in					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL							<u></u>		1
AK									
AZ					<u></u>				
AR									
CA									
со									
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
lA									
KS									
KY									
LA									
ME									
MD									
MA		X	Equity Series B Preferred Stock \$385,000	2	\$385,000	0	0		х
MI		х	Equity Series B Preferred Stock \$20,000	1	\$20,000	0	0		х
MN		Х	Equity Series B Preferred Stock \$54,000	3.	\$54,000	0	0		X
MS									
МО									
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC					1				
ND									

1	2		3		5				
	non-ac-	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of inv	Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
ОН									
OK									
OR									
PA		Х	Equity Series B Preferred Stock \$25,000	1	\$25,000	0	0		х
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA		х	Equity Series B Preferred Stock \$50,000	1	\$50,000	0	0		1
WA									
wv									
WI									
WY									
PR									